

General Assembly

Amendment

January Session, 2011

LCO No. 8632

SB0001608632SD0

Offered by:

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SEN. MAYNARD, 18th Dist.

To: Subst. Senate Bill No. 16 File No. 301 Cal. No. 205

"AN ACT CONCERNING STANDARDS FOR HEALTH CARE PROVIDER CONTRACTS."

1 Strike section 6 in its entirety and insert the following in lieu thereof:

"Sec. 6. (NEW) (Effective January 1, 2012) (a) No insurer, health care center, fraternal benefit society, hospital service corporation, medical service corporation or other entity delivering, issuing for delivery, renewing, amending or continuing an individual dental plan in this state shall include in any contract with a dentist licensed pursuant to chapter 379 of the general statutes that is entered into, renewed or amended on or after January 1, 2012, shall contain any provision that requires such dentist to accept as payment an amount set by such insurer, center, society, corporation or entity for services or procedures provided to an insured or enrollee that are not covered benefits under such insured's or enrollee's plan.

(b) A dentist shall not charge more for services or procedures that are not covered benefits than such dentist's usual and customary rate for such services or procedures.

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16 (c) Each evidence of coverage for an individual dental plan shall 17 include the following statement:

"IMPORTANT: If you opt to receive dental services or procedures that are not covered benefits under this plan, a participating dental provider may charge you his or her usual and customary rate for such services or procedures. Prior to providing you with dental services or procedures that are not covered benefits, the dental provider should provide you with a treatment plan that includes each anticipated service or procedure to be provided and the estimated cost of each such service or procedure. To fully understand your coverage, you may wish to review your evidence of coverage document."

(d) Each dentist shall post, in a conspicuous place, a notice stating that services or procedures that are not covered benefits under an insurance policy or plan might not be offered at a discounted rate."

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